Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER OF EYE SPECIALISTS OF IN PC

Street Address: 1950 W. 86th Street

City: Indianapolis

County: Marion

Administrator Name: Jennifer Knepp

Administrator Email: ASC Web Address:

Fiscal Year: 2016

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: • Yes • No

Corporate Tax Status: • For Profit • Non Profit

II. Identification of Surgical Resources

Number of operating rooms	4
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	3854	3854
B. Ten Most Frequent Surgical Procedures Perfo	ormed	
CPT Code		Total Procedures
66984		2482
66982		271
66821		1101

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	0
a surgical encounter.	